

Fee Calculation.

Claims as Amended					
For	# Filed	# Allowed	# Extra	Rate	Fee
Total Claims	27	- 20 =	7	x \$9	\$ 63
Independent Claims	3	- 3 =	0	x \$43	\$ 0
Multiple Dependent Claims			<input type="checkbox"/> (check if applicable)		\$ 0
Basic Fee (Small Entity)					\$ 385
Total Filing Fee (Including Claims in Preliminary Amendment)					\$ 448

Authorization to Charge Deposit Account and Small Entity Assertion. The Commissioner is authorized to apply any charges in this application filing to Deposit Account 501648 (Reference Number REVEO-0084USAADN02). Applicant's attorney hereby asserts small entity status on belief and knowledge.

Formal Drawings are hereby submitted.

Respectfully Submitted,



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